

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>AK</i>	<i>1020</i>	<i>11/10/01</i>
FORMALITY REVIEW			<i>04/27/01</i>
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral).... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	Original
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Claim	Date
Final	Original
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Claim	Date
Final	Original
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If more than 150 claims or 10 actions  
staple additional sheet here

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